

A Newsletter for MassHealth Providers

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The New Faces of MassHealth Provider Outreach

To bring our valued providers in the MassHealth community the highest quality of customer service, we are introducing our Provider Outreach Team, a dedicated group within Mass-Health Customer Service. We realize that as MassHealth enhances various aspects of our business to more efficiently meet your needs, changes will require introduction and education. Representatives will be going out into the field to answer questions and provide training. The Outreach Team's objective is to act as a liaison to the provider community to ensure that there is a continual stream of open communication.

Our provider team brings its own unique experiences and perspectives from a range of health-care-related backgrounds in order to give you first-rate service. We would like to take the time to introduce the new faces of the Provider Outreach Team.

Keith West came to MassHealth with over 11 years' experience in supporting the Delaware Medicaid system. Keith coordinates and oversees the efforts of the outreach teams. In addition to this responsibility, Keith is the liaison for provider types in the following areas:

nursing facilities, targeted case management for AIDS, rest homes, home health agen-



cies, private duty nurses, adult and group adult foster care, adult day care,



Michele Chapin

home care corporations, and hospice services.

Michele Chapin is a recent graduate of Stonehill College, and has

spent the past few years concentrating on the health care industry. Various positions at Children's Hospital Boston and the Public Health Committee at the Massachusetts State House have pre-

pared her for her current role. Michele is responsible for communicating with providers in the fields of physician services, optome-



Rick Flaherty

try, podiatry, nurse practitioners and midwives, dentists and all dental-related services, chiropractors, family planning, audiology, and PCC Plans among others.

After working with Unisys for eight years in a similar position, Rick Flaherty has extensive experience with both the Massachusetts Medicaid system and providers. Rick is the primary liaison to hospitals.

Outreach Representative Nancy Muise joined the team with more than 22 years

of health care experience, 13 of which were for Blue Cross and Blue Shield of Massachusetts. Nancy previously worked in Provider Services and Reimbursement, Accounts Receivable Accounting, Managed Care Analysis, and Claims and Underwriting. After building a strong background in understanding the logistics of health care insurance billing, Nancy wanted to become more engaged with provider issues by interacting with the provider community. Nancy is responsible for providers in occupational/physical/speech therapy, speech and hearing clinics, rehabilitation clinics, early intervention, oxygen and respiratory therapy, prosthetics, PCA fiscal intermediaries, personal care programs, independent living, pharmacy services, and durable medical equipment.

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The New Faces of MassHealth Provider Outreach

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Julie Moynihan came to MassHealth after working as a legislative aide at the State House in Boston. While

there, she became acquainted with the Mass-Health program and is excited about taking a more



Nancy Muise

interactive role in its support. Julie

acts as a liaison for providers who are psychologists, mental health centers, substance abuse and treatment centers, psychiatric day treatment centers, inpatient and outpatient psychiatric hospitals, semi-acute inpatient and outpatient hospitals, and community health centers.

Excellent communication is our goal at MassHealth, and our new Provider Outreach Team is just one facet in working toward meeting this goal. As always, our Customer Service Center



Julie Moynihan

to answer any general billing or enrollment questions you may have, but

you will also be hearing from the Outreach Team. We are committed to providing the attention and knowledge necessary to make your billing process as easy and efficient as possible.

The Senior Care Options Program

The Senior Care Options program is a voluntary, fully capitated Medicare and Medicaid managed care program, offered to eligible MassHealth members aged 65 and over, at all levels of need in community and institutional settings. The program directs senior care organizations (SCOs) to cover all of the services reimbursable under Medicare and MassHealth through its provider network.

The program offers a fully integrated geriatric model of care. The member's primary care physician and a team of nurses and specialists work with the member to develop a care

plan to meet individual needs. Such a service model benefits

Such a service plan benefits the members by allowing them the opportunity for individualized care.

the members by allowing them the opportunity for individualized care. For members who are enrolled in a SCO, REVS will identify the name and telephone number of the SCO.

MassHealth will not pay any provider other than the SCO for any services that are provided to a MassHealth member while the member is enrolled in a SCO. A MassHealth provider may contract with a SCO in order to participate in its network and offer services to SCO members. If you are interested in contracting with a SCO, more information can be obtained from the SCO Unit at 1-888-885-0484.

For more information about SCO. please visit the "News & Updates" link on the www.mass.gov/masshealth Web site.

New on mass.gov/masshealth

May and June Educational Training Sessions Info

MassHealth would like to thank all the providers who attended one of the May or June educational training sessions, focused on the expanded MassHealth customer service option that began on July 1, 2005. Questions and Answers compiled from provider questions are available for viewing or download on

the Web site in the "<u>Information for</u> <u>MassHealth Providers</u>" section.

All educational training materials are posted online for you to access if you are unable to attend a session or would like additional information.

Updated Quick Reference Directory

MassHealth expanded its customer service for providers and members, effective July 1, 2005. A detailed <u>directory</u> including new telephone numbers, fax

numbers, e-mail addresses, and mailing addresses is now available in the "News & Updates" section of our Web site.

New MassHealth Companion Guides Online

Companion guides effective June 23, 2005, are now available online for viewing and/or download in the "Information for MassHealth Providers" section of the Web site.

The Automated Solutions Advantage

Point and Click on Our Web-based Transaction Solution *Now!*

If you are interested in saving time and money-whether you currently submit claims on paper, diskette, or CD-ROM-you should take advantage of Mass-Health's Web-based claim submission option at www.mass.gov/masshealth. This business solution was specifically designed to make submitting claims and retrieving information as easy and efficient as a click of the mouse.

Now you can minimize the time and administrative costs associated with billing by going to one central location for uploading and downloading all of your electronic MassHealth files including the 837 claim, 997 acknowledgement, and 835 remittance advice transactions. Our electronic transaction capabilities have been greatly improved through the use of this Web-based electronic data interchange (EDI) method, providing you with a faster, more accurate option for claims submission and transaction retrieval.

Submitting and retrieving files through

the Web site is user-friendly and completely free and can benefit any Mass-Health trading partner. From direct and efficient electronic claim submission to instantaneous confirmation of receipt of your files, there are several advantages in using the Web-based solution. These benefits include:

- one centralized location for submitting and receiving all claims-related transactions;
- immediate delivery of claims, avoiding the hassle, costs, and possible time delays associated with mail delivery;
- virtually instantaneous confirmation that the submitted file was received; and
- ability to review and download up to six months' worth of 997 and 835 transaction files anytime via the Web site

If you currently mail electronic claims on disk or CD-ROM, the Web-based

option offers an even more accurate and efficient solution. Although diskette and CD-ROM are still accepted, we encourage you to consider our Web-based option.

Still submitting paper claims? We encourage you to make the change to electronic submission. MassHealth will work with you each step of the way, and provide free software to assist you.

Sign Up for Your Web Account!

Send an e-mail to providersupport@mahealth.net to get started, or call MassHealth Customer Services at 1-800-841-2900.

MassHealth currently provides health-care benefits through approximately 27,000 providers.

Looking Ahead with MassHealth

REVS Modifications

In September 2005, REVS will be modified to display 13 months of eligibility history for MassHealth members. This change is being applied based on MassHealth provider input on the consolidation of multiple programs under EOHHS. This enhancement will be available on WebREVS, REVS PC software, and the Eligibility Operator. For questions, please call the REVS Help-Desk at 1-800-462-7738 or go online in the "Information for MassHealth Providers" section.

We Want to Hear from You

As we continue to enhance and inte-

grate customer services, we want to learn about your problems, get your comments, and respond to your questions, especially those related to the self-service options that are currently available on the Web site. In the upcoming months, MassHealth will be offering an online survey to get your feedback and see what we can do to enhance your online experience. You will be able to com-

Please check out all the new information at mass.gov/masshealth by in the "News & Updates" section. plete and submit questionnaires online. We want to address all your needs, so let us know what we can do to help.

Online Registration for Educational Training Sessions

Providers will soon be able to sign up for training sessions through the mass.gov Web site. Registering for training will be as simple as completing and submitting the online Training Request form. This form will be located in the "Online Services" section of the Web site.

Answers to Your Questions

What will happen to the claims that were sent before 7/1/05 that haven't been paid?

Claims submitted before 7/1/05 will be processed. The transition will be transparent to you. Claims received at the old address after 7/1/05, will be delivered by courier to the new address.

We currently get the 835 on CD. Can it be downloaded from mass.gov?

Yes, as of June 23, 2005, electronic submitters who have access to mass.gov can view and download the

last six months of their 835 files. Call 1-800-841-2900 or e-mail providersupport@mahealth.net to sign up today!

Will REVS go back farther than six months for eligibility?

Yes. Beginning 9/1/05, you will be able to see the current month and the previous 12 months.

Can REVS do batch eligibility?

Yes, through our REVS PC software or by directly submitting through the Web site. Please call the REVS HelpDesk at 1-800-462-7738 for assistance or see the Web site under "Information for MassHealth Providers." Submitting

through the Web site requires HIPAA testing and use of the 270/271 Companion Guide. The call center will need to be contacted (use the number above) to resolve any testing issues.

Is there any change to the address for requesting 90-day waivers?

Effective July 1, 2005, 90-day waiver requests should be mailed to P.O. Box 9118, Hingham, MA 02043.

How often is the REVS database updated?

The REVS database is updated nightly.

MassHealth Reminders

- ◆ The new expansion and integration of MassHealth Customer Service includes new services and options to improve the delivery of administrative services to providers. Please read <u>All Provider Bulletin 144</u> for more information.
- ◆ The Local Education Authority (LEA) participating in the Municipal Medicaid Program must follow
- the provider agreement with Mass-Health. The Medicaid eligibility factor must be calculated quarterly. However, the "Time Study Manual" contains a one-time process that must be followed for the quarter ending September 30, 2005. Please refer to the Municipality Based Health Services Bulletin 11 from June.
- ♦There are new billing procedures for

repairs to durable medical equipment and respiratory therapy equipment. Please read the July Remittance Advice (RA) message text for details.

More information on RA messages, provider bulletins, revised regulations, and manual revisions are available online at mass.gov/masshealth by choosing "MassHealth Regulations and Other Publications" and then "Provider Library."

Quick Reference Directory

Customer Service Call Center: 1-800-841-2900

(**To contact any of the departments below by phone, use the Customer Service Call Center phone number above.)

Billing and policy questions (except for retail pharmacy)

Fax: 617-988-8974 or providersupport@mahealth.net

Provider training and outreach

Fax: 617-988-8974 or providersupport@mahealth.net

Provider enrollment

Fax: 617-988-8974 or providersupport@mahealth.net

HIPAA transactions support

Fax: 617-988-8971 or hipaasupport@mahealth.net

EDI general support

Fax: 617-988-8972 or EDI@mahealth.net

Publication requests

617-988-8973 (fax) or publications@mahealth.net

Member support

Fax: 617-988-8975 or membersupport@mahealth.net

A complete listing is available online from the "News & Updates section.